

06/07/2001 14:50

From: FAX To: Doug Hancock

5032497058

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Date: 06/07/2001 Time: 14:50:00

PAGE .07

FROM: MICROTEK

FAX NO.: 6524482

06-07-01 12105P P.06

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1115/005
First Named Inventor	KUZYK, Michael A.
COMPLETE IF KNOWN	
Application Number	09 / 677,374
Filing Date	15 September 2000
Group Art Unit	1642
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**VACCINES AND AGENTS FOR INDUCING IMMUNITY TO FISH AGAINST RICKETTSIAL DISEASES,
AND ASSOCIATED PREVENTATIVE THERAPY**

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(If applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
2,381,913	CA	09/17/1999	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/154,437	17 September 1999	<input type="checkbox"/>

[Page 1 of 3]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

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OR Correspondence address below

Name Ipsolon LLP

Address 805 S.W. Broadway, #2740

Address

City Portland

OR
State

ZIP 97205

Country US

Telephone 503-249-7066

Fax 503-249-7068

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

A petition has been filed for this unsigned inventor

NAME OF SOLE OR FIRST INVENTOR:

Given Name Michael A.
(first and middle (if any))

Family Name Kuszyk
or Surname

Inventor's
Signature

June 7, 2001
Date

Residence: City Victoria

State BC

Country CA

Citizenship CA

Mailing Address

1903 - 1533 Jubilee Avenue

1235 Basil Avenue

Mailing Address

City Victoria

State BC

ZIP V8R 4M4 VPT 2G1

Country CA

NAME OF SECOND INVENTOR:

Given Name Jan
(first and middle (if any))

Family Name Burles
or Surname

Inventor's
Signature

June 7, 2001
Date

Residence: City Victoria

State BC

Country CA

Citizenship CA

Mailing Address

#80 - 1731 Newton Street

Mailing Address

City Victoria

State BC

ZIP V8R 2R2

Country CA

Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 3

DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William W.		Kay	
Inventor's Signature	07/06/01		
Residence: City Victoria	State BC	Country CA	Citizenship CA
Mailing Address 3620 Cadboro Bay Road			
Mailing Address			
City Victoria	State BC	ZIP V8R 5K8	Country CA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Julian C.		Thompson	
Inventor's Signature	07-JUL-01		
Residence: City Victoria	State BC	Country CA	Citizenship CA
Mailing Address 1219 Oscar Street			
Mailing Address			
City Victoria	State BC	ZIP V8V 2X6	Country CA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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06-07-01 12:04P P.05



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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/677,374
Filing Date	15 September 2000
First Named Inventor	KUZYK, Michael A.
Group Art Unit	1642
Examiner Name	
Attorney Docket Number	1115-005/ddb

I hereby appoint:

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Name	Registration Number
Douglas D. Hancock	35,889
Robert H. Barrigar	26,125

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<input checked="" type="checkbox"/> Firm or Individual Name	Ipsilon LLP		
Address	805 S.W. Broadway, #2740		
Address			
City	Portland	State	OR
Country	US	Zip	97205
Telephone	503-249-7066	Fax	503-249-7068

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

SIGNATURE of Applicant or Assignee of Record

Name	Michael A. Kuzik
Signature	
Date	June 7/2001
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
<input checked="" type="checkbox"/> Total of 4 forms are submitted.	

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06-07-01 12:04P P,03

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PTO/SB/81 (10-06)

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Application Number	09/677,374
Filing Date	15 September 2000
First Named Inventor	KUZYK, Michael A.
Group Art Unit	1642
Examiner Name	
Attorney Docket Number	1115-005/ddh

I hereby appoint:

 Practitioner(s) at Customer Number

OR

 Practitioner(s) named below:

Name	Registration Number
Douglas D. Hancock	35,889
Robert H. Banister	26,125

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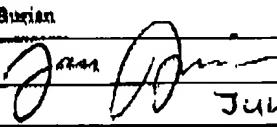
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<input checked="" type="checkbox"/> Firm or Individual Name	Ipsilonol LLP			
Address	805 S.W. Broadway, #2740			
Address				
City	Portland	State	OR	Zip
Country	US			
Telephone	503-249-7066	Fax	503-249-7066	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Jan Banister		
Signature			
Date	June 4, 2001		

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/677,374
Filing Date	15 September 2000
First Named Inventor	KUZYK, Michael A.
Group Art Unit	1642
Examiner Name	
Attorney Docket Number	1115-005/dbh

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Name	Registration Number
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<input checked="" type="checkbox"/> Firm or Individual Name	Ipsolon L.L.P.		
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Address			
City	Portland	State	OR
Country	US	ZIP	97205
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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	William W. Kay
Signature	<i>William Kay</i>
Date	7/06/01

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Application Number	09/677,374
Filing Date	15 September 2000
First Named Inventor	KUZYK, Michael A.
Group Art Unit	1642
Examiner Name	
Attorney Docket Number	1115-005/ddh

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Name	Registration Number
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Robert H. Barrick	26,125

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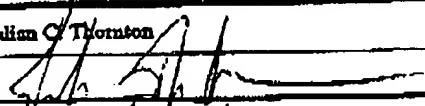
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<input checked="" type="checkbox"/> Firm or Individual Name	Ipsilon LLP		
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Address			
City	Portland	State	OR
Country	US	Zip	97205
Telephone	503-249-7066	Fax	503-249-7068

I am the:

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86).

SIGNATURE of Applicant or Assignee of Record

Name	Julian C. Thornton
Signature	
Date	07/01/01
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